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PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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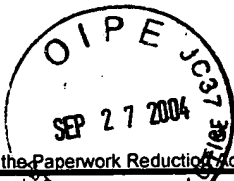
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/602,504	
	Filing Date	06/24/2003	
	First Named Inventor	Mary F. Doerner	
	Art Unit	1775	
	Examiner Name	Lavilla, Michael E.	
Total Number of Pages in This Submission	7	Attorney Docket Number	HSJ920030094US1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks A replacement sheet 3 of the previously submitted formal drawings is submitted with this Amendment.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Thomas R. Berthold	
Signature		
Date	09/23/2004	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Thomas R. Berthold		
Signature		Date	09/23/2004

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PTO/SB/17 (10-01)
Approved for use through 07/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/602,504
Filing Date	06/24/2003
First Named Inventor	Mary F. Doerner
Examiner Name	Lavilla, Michael E.
Group Art Unit	1775
Attorney Docket No.	HSJ920030094US1

TOTAL AMOUNT OF PAYMENT (\$) 0.00

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number

502587

Deposit
Account
Name

Hitachi Global Storage Technologies

- ☒ Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

- ☐ Applicant claims small entity status.
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description
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1001	770	2001	385	Utility filing fee
1002	340	2002	170	Design filing fee
1003	530	2003	265	Plant filing fee
1004	770	2004	385	Reissue filing fee
1005	160	2005	80	Provisional filing fee

Fee Paid

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
2	-20** = 0	18.00	0.00
2	-3** = 0	86.00	0.00
Multiple Dependent			

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)
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1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid		
1051	130	205	65	Surcharge - late filing fee or oath	
1052	50	227	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	139	130	Non-English specification	
1812	2,520	147	2,520	For filing a request for ex parte reexamination	
1804	920*	112	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
1251	110	215	55	Extension for reply within first month	
1252	420	216	205	Extension for reply within second month	
1253	950	217	465	Extension for reply within third month	
1254	1,480	218	725	Extension for reply within fourth month	
1255	2,010	228	985	Extension for reply within fifth month	
1401	330	219	160	Notice of Appeal	
1402	330	220	160	Filing a brief in support of an appeal	
1403	290	221	140	Request for oral hearing	
1451	1,510	138	1,510	Petition to institute a public use proceeding	
1452	110	240	55	Petition to revive - unavoidable	
1453	1,330	241	650	Petition to revive - unintentional	
1501	1,330	242	650	Utility issue fee (or reissue)	
1502	480	243	235	Design issue fee	
1503	640	244	310	Plant issue fee	
1460	130	122	130	Petitions to the Commissioner	
1807	50	123	50	Processing fee under 37 CFR 1.17(q)	
1806	180	126	180	Submission of Information Disclosure Stmt	
8021	40	581	40	Recording each patent assignment per property (times number of properties)	
1809	770	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	279	375	Request for Continued Examination (RCE)	
1802	900	169	900	Request for expedited examination of a design application	
Other fee (specify)					
SUBTOTAL (3)				(\$)	

SUBMITTED BY

Name (Print/Type)	Thomas R. Berthold	Registration No. (Attorney/Agent)	28,689	Telephone	(408) 396-8411
Signature				Date	09/23/2004

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